



# Recreation Center

## Membership Hold Form

*"Optimizing the Experience of Living"*

Please complete this form and return it to the front desk or via email to CRC@colchestervt.gov. The Director will need to approve this request before any action can take place on your account.

Membership #: \_\_\_\_\_

Today's Date: \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Membership Type:                      Adult                      Senior                      Family                      Youth

Family Member Name(s) (if applicable): \_\_\_\_\_

### Membership Hold

Memberships can be put on hold for up to 90 based days on medical reasons or extenuating circumstances. Holds must be placed 15 days prior to your billing due date, otherwise suspension will be applied to the next scheduled payment. Please include a note from your physician confirming your condition. Only one hold per calendar year.

Hold Duration (Days):                      30                      60                      90

Start Date: \_\_\_\_\_                      End Date: \_\_\_\_\_

Reason for Membership Hold:

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I understand and confirm the changes made to my account. I acknowledge that I will not receive any refunds and past due fees for the household must be paid in full in order to register for any other Recreation program. This form must be submitted 15 business days prior to your billing due date.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### OFFICE USE ONLY

MEMBERSHIP #: \_\_\_\_\_

STAFF INITIALS: \_\_\_\_\_

EFFECTIVE DATE: \_\_\_\_\_

DIRECTOR SIGNATURE: \_\_\_\_\_